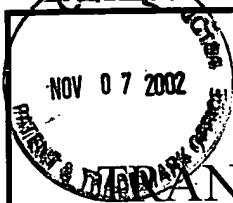


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AF/1644

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**TRANSMITTAL  
FORM**

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NOV 12 2002

TECH CENTER

1600/2900

Application Serial Number	09/248,964
Filing Date	February 12, 1999
First Named Inventor	Wucherpfennig
Group Art Unit	1644
Examiner Name	A. M. Decloux
Attorney Docket No.	HAR-005
Patent No.	Not applicable
Issue Date	Not applicable

**ENCLOSURES (check all that apply)**

<input checked="" type="checkbox"/> Fee Transmittal Form <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Two Checks Attached</li> <li><input type="checkbox"/> Copy of Fee Transmittal Form</li> </ul>	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553) <input type="checkbox"/> Formal Drawing(s) <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input checked="" type="checkbox"/> Associate Power of Attorney <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> CD(s) for large table or computer program <input type="checkbox"/> Amendment After Allowance <input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)	<input checked="" type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Brief (in triplicate) <input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 <input type="checkbox"/> Additional Enclosure(s) (please identify below)
<input type="checkbox"/> Amendment/Response <ul style="list-style-type: none"> <li><input type="checkbox"/> Preliminary</li> <li><input type="checkbox"/> After Final</li> <li><input type="checkbox"/> Affidavits/declaration(s)</li> <li><input type="checkbox"/> Letter to Official Draftsperson including Drawings</li> <li>[Total Sheets _____]</li> </ul>		
<input checked="" type="checkbox"/> Petition for Extension of Time		
<input type="checkbox"/> Information Disclosure Statement <ul style="list-style-type: none"> <li><input type="checkbox"/> Form PTO-1449</li> <li><input type="checkbox"/> Copies of IDS Citations</li> </ul>		
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Sequence Listing submission <ul style="list-style-type: none"> <li><input type="checkbox"/> Paper Copy/CD</li> <li><input type="checkbox"/> Computer Readable Copy</li> <li><input type="checkbox"/> Statement verifying identity of above</li> </ul>		

**CORRESPONDENCE ADDRESS**

**SIGNATURE BLOCK**

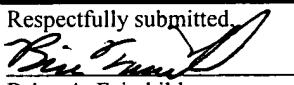
Direct all correspondence to: Patent Administrator  
 Testa, Hurwitz & Thibeault, LLP  
 High Street Tower  
 125 High Street  
 Boston, MA 02110  
 Tel. No.: (617) 248-7000  
 Fax No.: (617) 248-7100

Date: November 7, 2002  
 Reg. No. 48,645  
 Tel. No.: (617) 248-7697  
 Fax No.: (617) 248-7100

Respectfully submitted,  
  
 Brian A. Fairchild  
 Agent for Applicant(s)  
 Testa, Hurwitz & Thibeault, LLP  
 High Street Tower  
 125 High Street  
 Boston, MA 02110

<b>CONFIDENTIAL</b> <b>TRANSMITTAL</b> <b>FY 2003</b> <b>NOV 07 2002</b>		<i>Completely Known</i>	
		Application Serial Number	09/248,964
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METHOD OF PAYMENT		FEE CALCULATION (continued)																																																																																	
1. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Two Checks <input type="checkbox"/> Money Order <input type="checkbox"/> Other		<b>3. ADDITIONAL FEES</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Large Entity</th> <th style="text-align: left;">Small Entity</th> <th rowspan="2" style="width: 50%;">Fee Description</th> <th rowspan="2" style="width: 50%;">Fee Paid</th> </tr> <tr> <th>Fee (\$)</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>130</td> <td>65</td> <td>Surcharge - late filing fee or oath</td> <td></td> </tr> <tr> <td>50</td> <td>25</td> <td>Surcharge - late provisional filing fee or cover sheet</td> <td></td> </tr> <tr> <td>130</td> <td>130</td> <td>Non-English specification</td> <td></td> </tr> <tr> <td>2,520</td> <td>2,520</td> <td>Request for ex parte reexamination</td> <td></td> </tr> <tr> <td>110</td> <td>55</td> <td>Extension for reply within first month</td> <td></td> </tr> <tr> <td>400</td> <td>200</td> <td>Extension for reply within second month</td> <td></td> </tr> <tr> <td>920</td> <td>460</td> <td>Extension for reply within third month</td> <td>460.00</td> </tr> <tr> <td>1440</td> <td>720</td> <td>Extension for reply within fourth month</td> <td></td> </tr> <tr> <td>1960</td> <td>980</td> <td>Extension for reply within fifth month</td> <td></td> </tr> <tr> <td>320</td> <td>160</td> <td>Notice of Appeal</td> <td>160.00</td> </tr> <tr> <td>320</td> <td>160</td> <td>Filing a brief in support of an appeal</td> <td></td> </tr> <tr> <td>280</td> <td>140</td> <td>Request for oral hearing</td> <td></td> </tr> <tr> <td>130</td> <td>130</td> <td>Petitions to the Commissioner</td> <td></td> </tr> <tr> <td>180</td> <td>180</td> <td>Submission of Information Disclosure Statement</td> <td></td> </tr> <tr> <td>740</td> <td>370</td> <td>Filing a submission after final rejection (37 CFR 1.129(a))</td> <td></td> </tr> <tr> <td>740</td> <td>370</td> <td>For each additional invention to be examined (37 CFR 1.129(b))</td> <td></td> </tr> <tr> <td>100</td> <td>100</td> <td>Certificate of Correction for applicant's error</td> <td></td> </tr> <tr> <td colspan="2" style="text-align: center;">Other fee (Specify)</td> <td colspan="2" style="text-align: center;">Other fee (Specify)</td> <td></td> </tr> </tbody> </table>			Large Entity	Small Entity	Fee Description	Fee Paid	Fee (\$)	Fee (\$)	130	65	Surcharge - late filing fee or oath		50	25	Surcharge - late provisional filing fee or cover sheet		130	130	Non-English specification		2,520	2,520	Request for ex parte reexamination		110	55	Extension for reply within first month		400	200	Extension for reply within second month		920	460	Extension for reply within third month	460.00	1440	720	Extension for reply within fourth month		1960	980	Extension for reply within fifth month		320	160	Notice of Appeal	160.00	320	160	Filing a brief in support of an appeal		280	140	Request for oral hearing		130	130	Petitions to the Commissioner		180	180	Submission of Information Disclosure Statement		740	370	Filing a submission after final rejection (37 CFR 1.129(a))		740	370	For each additional invention to be examined (37 CFR 1.129(b))		100	100	Certificate of Correction for applicant's error		Other fee (Specify)		Other fee (Specify)		
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2. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 20-0531. <input type="checkbox"/> Required Fees (copy of this sheet enclosed). <input checked="" type="checkbox"/> Additional fee required under 37 CFR 1.16 and 1.17. <input checked="" type="checkbox"/> Overpayment Credit. 3. <input type="checkbox"/> Applicant claims small entity status.																																																																																			
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Direct all correspondence to:		Respectfully submitted,  Brian A. Fairchild Attorney for the Applicants Testa, Hurwitz & Thibeault, LLP High Street Tower-125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100																																																																																	